



HAWAII STATE ETHICS COMMISSION
1001 BISHOP STREET, ASB TOWER 970
P.O. BOX 616, HONOLULU, HAWAII 96809
TEL: 587-0460 FAX: 587-0470
email: ethics@hawaiilethics.org

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STATE OF HAWAII
STATE ETHICS COMMISSION

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

| | | | | |
|---|--|---------|------------|--------------|
| PART I LOBBYIST | | | | |
| NAME (Last) | | (First) | (Middle) | TELEPHONE |
| Slovin | | Gary | M. | 808-547-5600 |
| MAILING ADDRESS (Street) | | | | FAX |
| 1099 Alakea Street, Suite 1800 | | | | 808-547-5880 |
| (City) | | (State) | (Zip Code) | |
| Honolulu | | HI | 96813 | |
| EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby) | | | | TELEPHONE |
| Goodsill Anderson Quinn & Stifel | | | | 808-547-5600 |
| MAILING ADDRESS (Street) | | | | FAX |
| 1099 Alakea Street, Suite 1800 | | | | 808-547-5880 |
| (City) | | (State) | (Zip Code) | |
| Honolulu | | HI | 96813 | |

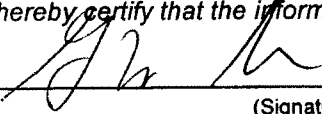
| | | | |
|--|--|---------|--------------|
| PART II ORGANIZATION | | | |
| NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate) | | | TELEPHONE |
| University of Hawaii Foundation | | | 808-956-4510 |
| MAILING ADDRESS (Street) | | | FAX |
| 2444 Dole Street, Bachman Hall, Room 105 | | | 808-956-5115 |
| (City) | | (State) | (Zip Code) |
| Honolulu | | HI | 96822 |
| NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT | | | TELEPHONE |
| William R. King | | | 808-956-4510 |
| MAILING ADDRESS (Street) | | | FAX |
| 2444 Dole Street, Bachman Hall, Room 105 | | | 808-956-5115 |
| (City) | | (State) | (Zip Code) |
| Honolulu | | HI | 96822 |

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

- | | | | |
|--|---|---|---|
| <input type="checkbox"/> Agriculture | <input checked="" type="checkbox"/> Education | <input type="checkbox"/> Human Services | <input type="checkbox"/> Science, Technology & Economic Development |
| <input type="checkbox"/> Communications & Public Utilities | <input type="checkbox"/> Government Operation & Finance | <input type="checkbox"/> Intergovernmental Relations, International Affairs | <input type="checkbox"/> Tourism & Recreation |
| <input checked="" type="checkbox"/> Consumer Protection & Commerce | <input type="checkbox"/> Hawaiian Affairs | <input type="checkbox"/> Labor & Employment | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Culture, Arts, Historic Preservation | <input type="checkbox"/> Health | <input type="checkbox"/> Planning, Land & Water Use Management | <input type="checkbox"/> Other: (indicate below) |
| <input type="checkbox"/> Ecology, Energy Environmental Protection | <input type="checkbox"/> Housing | <input type="checkbox"/> Public Safety & Corrections | _____ |

PART IV CERTIFICATION OF LOBBYIST

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.



(Signature of Lobbyist)

1/15/07

(Date)

PART V AUTHORIZATION TO LOBBY

| | |
|------|--|
| NAME | TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED |
|------|--|

William R. King

VP for Administration / CFO

NAME OF ORGANIZATION (if applicable)

University of Hawaii Foundation

TELEPHONE

808-956-4510

MAILING ADDRESS (Street)

2444 Dole Street, Bachman Hall, Room 105

FAX

808-956-5115

(City)

Honolulu

(State)

HI

(Zip Code)

96822

I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.



(Signature of Authorizing Officer or Person Represented)

1/10/07

(Date)